



Commonwealth
of Massachusetts

Center for Health
Information and Analysis

All Payer Claims Database Data Volume Reports

2008 - 2012

March 2013

The Commonwealth of Massachusetts established an All Payer Claims Database (APCD) in 2010 as one of the largest data collection efforts undertaken by the state. Regulation 114.5 CMR 21.00, Health Care Payer Claims Data Submissions, requires health insurance payers to submit medical, pharmacy, and dental claims, as well as information about member eligibility, benefit design, and providers to the Center for Health Information and Analysis (CHIA) for Massachusetts residents. The goals of the APCD are to provide administrative simplification to payers and to provide access to timely, accurate, and relevant data for improving quality, mitigating costs, and promoting transparency in the health care delivery system.

The charts below depict the number of records submitted to the Center as of December 2012 by health insurance payers. These Data Volume Reports are a concise way of presenting the amount of APCD data collected by year and file type.

Please feel free to submit any questions related to the reports to the Center's APCD mailbox: CHIA-APCD@state.ma.us.

Thank you for your interest in the All Payer Claims Database.

Commonwealth of Massachusetts-Center for Health Information and Analysis (CHIA)
APCD Data Volume Reports 2008-2012 (based on data received by 12/19/2012)

Aetna Life Insurance Company - Aetna Student Health														
File Type*	Submission Year	January	February	March	April	May	June	July	August	September	October	November	December	Total
PR	2010	0	0	0	0	0	0	0	0	0	0	0	208	208
PR	2011	0	0	209	0	209	209	0	0	239	0	0	264	1130
PR	2012	0	0	272	0	0	276	0	0	276				824
ME	2009	0	0	0	0	0	0	0	0	0	0	0	98,749	98749
ME	2010	0	0	0	0	0	0	0	0	0	0	0	125,383	125383
ME	2011	98,427	98,334	98,753	99,740	100,883	101,366	90,570	87,076	92,356	94,867	96,961	100,817	1,160,150
ME	2012	102,149	104,036	106,055	108,060	110,792	111,880	104,362	98,409	102,379	107,347	109,750		1,165,219
PV	2011	0	0	0	0	0	0	0	0	0	0	0	0	0
PV	2012	0	0	0	0	0	0	0	0	0				0
MC	2008	16,071	15,280	18,243	18,552	20,490	16,173	17,062	13,032	13,172	12,959	13,169	13,001	187,204
MC	2009	14,736	14,691	16,307	15,588	17,029	19,507	17,735	13,408	12,290	17,006	9,201	12,557	180,055
MC	2010	13,576	12,049	14,381	16,845	15,820	16,026	12,978	14,436	16,882	15,262	15,162	15,191	178,608
MC	2011	13,656	13,798	19,723	17,161	16,799	18,760	16,015	16,583	13,036	16,851	17,564	22,850	202,796
MC	2012	20,278	19,732	21,334	21,669	25,040	20,798	22,249	23,704	12,088	20,273	16,536		223,701
PC	2008	0	0	0	0	0	0	0	0	0	0	0	0	0
PC	2009	0	0	0	0	0	0	0	0	0	0	0	0	0
PC	2010	0	0	0	0	0	0	0	0	0	0	0	0	0
PC	2011	0	0	0	0	0	0	0	0	0	0	0	0	0
PC	2012	0	0	0	0	0	0	0	0	0				0
DC	2008	0	0	0	0	0	0	0	0	0	0	0	0	0
DC	2009	0	0	0	0	0	0	0	0	0	0	0	0	0
DC	2010	0	0	0	0	0	0	0	0	0	0	0	0	0
DC	2011	0	0	0	0	0	0	0	0	0	0	0	0	0
DC	2012	0	0	0	0	0	0	0	0	0				0

***Key:** PR=Product Records; ME=Member Eligibility Records; PV=Provider Records; MC=Medical Claim Lines; PC=Pharmacy Claim Lines; and DC=Dental Claim Lines.

The Volume Report presents the APCD inventory as of December 2012 and reflects the related compliance requirements:

- Medical, pharmacy, and dental submissions are required monthly beginning January 2008.
- Provider submissions are required monthly beginning January 2011. The May 2011 submission contains historical records from 2008 through May 2011.
- Product submissions are required quarterly beginning December 2010. The May 2011 submission contains historical records from 2008 through 2010 plus 2011, quarter one.
- Member eligibility submissions are required monthly beginning in January 2011. Prior to 2011, payers were required to submit two eligibility files: a December 2009 eligibility submission covering calendar years 2008 and 2009, and a December 2010 eligibility submission covering calendar years 2009 and 2010. Eligibility files contain data for twenty-four months of member eligibility.
- The APCD liaisons monitor and enforce compliance rules and authorize exceptions. Some carriers have incomplete data due to: exemptions from filing, limited claim or member base, phasing into APCD and are currently in testing or ramping up their production data filings, are in the process of updating specific submissions, and/or non-compliance.

These numbers represent the number of records submitted, not actual counts of members, providers, products or claims.





